PTO/SB/06 (08-0)

Approved for use through 7/31/2006. OMB 0651-0012
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	P/	ATENT APP	-10A11	o, no persons are ON FEE DE stitute for Form	I EKIMINA I	ION	RECORE	information	unless it di	lication or Docke	T OF COMMEI MB control num t Number 916
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY									Of	OTHER THAN SMALL ENTITY	
	FOR NUMBER FILED NUMBER EXTRA					1	RATE	FEE		DATE	
(3	7 CFR 1.16(a))					7		395	기	RATE	5790
	TAL CLAIMS CFR 1.16(c))		minus	320 = .		1	x s 25 =		— "		
(3)	DEPENDENT CL	AIMS				-			OF		
	ULTIOL & DOCUMENT					-	× s <u>100</u> =		OR	× s <u>200</u> =	:
IVIC	ULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+s180=		OR	+5360	
 If the difference in column 1 is less than zero, enter "0" in column 2. 						TOTAL		OR	TOTAL		
	(CLAIMS AS A	MENDE	D – PART II						- · · · · ·	L
9	29.05			(Column 2) (Column 3)		SMALL	ENTITY	OR		ER THAN L ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMEN	1	HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))	14	Minus		= /	1	×35 =	FEE		+ Z^	FEE
	Independent (37 CFR 1.16(b))	2	Minus		1= (+†			OR	X \$ 500 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					┨┠	× \$100=	 	OR	x s 200	- "
	TINOTTRESER	TATION OF MULTI	PLE DEPEN	DENT CLAIM (37	CFR 1.16(d))	JL	+ \$180 =		OR	+5360	
							TOTAL ADD'L FEE		OR	ADD'L FEE	
_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST					, ,-			_		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))		Minus	••	= .		· 25 =		1	× \$ <u>5</u> 0 =	FEE
	Independent (37 CFR 1.16(b))	•	Minus	···	=		s 100 =		OR		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						- 5_18O=		OR	× \$_200=	
						7	OTAL		OR	+ \$13600=	
		(0.1				μ	DD'L FEE		OR	ADD'L FEE	
Ţ		(Column 1) CLAIMS	1	(Column 2) HIGHEST	(Column 3)	r-			ı ·		
Şŀ		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))	•	Minus	••	=	×	:25 =		05	× 50 =	FEE
	Independent (37 CFR 1.16(b))	•	Minus	***	=	_	= 001s		OR OR	× \$ <u>200</u> =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						s180 =		OR OR	+ 360=	· · · · · · · · · · · · · · · · · · ·
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR L	TOTAL ADD'L FEE	
***	If the "Highest N	lumber Previously umber Previously	Paid For" Paid For"	in column 2, write IN THIS SPACE IN IN THIS SPACE I Total or Independe	is less than 20, er	nter "2				L	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.